


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 12, 2004 8:00 am**  
**Secretary of State**

02-12-2004 90031 004 \*\*\*150.00

<b>DOCUMENT # P03000063397</b>		
1. Entity Name <b>PAUL E'S CATERING, INC.</b>		

Principal Place of Business <b>11200 VALENCIA ISLES BLVD BOYNTON BCH, FL 33437</b>	Mailing Address <b>11200 VALENCIA ISLES BLVD BOYNTON BCH, FL 33437</b>
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2. Principal Place of Business	3. Mailing Address <b>7315 Tonga Court</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State <b>Boynton Beach, FL</b>	City & State <b>Boynton Beach, FL</b>
Zip <b>33437</b>	Country <b>FL</b>



01202004 Chg-P CR2E034 (10/03)

6. Name and Address of Current Registered Agent <b>CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS RD 221E PALM BCH GARDENS, FL 33410</b>	
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4. FEI Number <b>20-0032319</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
7. Name and Address of New Registered Agent Name <b>PAUL Ehrenworth</b> Street Address (P.O. Box Number is Not Acceptable) <b>7315 TONGA CT</b> City <b>Boynton Beach</b> FL <b>33437</b>	

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE <b>Paul Ehrenworth</b>	DATE <b>2/10/04</b>

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D EHRENWORTH, PAUL 11200 VALENCIA ISLES BLVD BOYNTON BCH, FL 33437</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>7315 Tonga Court Boynton Beach, FL 33437</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D BELLOW-EHRENWORTH, MARLENE 11200 VALENCIA ISLES BLVD BOYNTON BCH, FL 33437</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>7315 Tonga Court Boynton Beach, FL 33437</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with full other like empowered.	
SIGNATURE: <b>Paul Ehrenworth President</b>	DATE <b>2/10/04</b>